## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

4315 6

| CLAIMS AS FILED - PART I   |  |                                 |                  |                  |              |                  |            | SMALL             | ENTITY      |          |            | R THAN   |
|--|--|---------------------------------|------------------|------------------|--------------|------------------|------------|-------------------|-------------|----------|------------|----------|
| T  | OTAL CLAIM                                     | S                               |                  | (Column 1)       |              | (Column 2)       |            | TYPE              |             | OR       |            | ENTITY   |
|  |  |                                 |                  |                  |              |                  | <b>∤</b> ∤ | RATE              | FEE         | - -      | RATE       | FEE      |
| FOR  |  |                                 | NUMBER FILED     |                  | NUMBER EXTRA |                  |            | BASIC FE          | E 385.00    | OR       | BASIC FE   | E 770.00 |
| TO   | OTAL CHARGE                                    | EABLE CLAIMS                    | 12 m             | て minus 20=      |              | *                |            | X\$ 9=            |             | OR       | X\$18=     |          |
| INDEPENDENT CLAIMS   |  |                                 | ( minus 3 =      |                  |              | -                |            | X43=              |             | OR       | X86=       |          |
| М  | JLTIPLE DEPE                                   | ENDENT CLAIM F                  | PRESENT          | RESENT           |              |                  |            | +145=             |             | OR       | +290=      |          |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |                                 |                  |                  |              | L                | TOTAL      | 385               | OR          | TOTAL    | -          |          |
| CLAIMS AS AMENDED - PART II  |  |                                 |                  |                  |              |                  |            |                   | (38)        | <b>_</b> |            | THAN     |
| ٠  |  | (Column 1)                      |                  | (Colum           |              | (Column 3)       |            | SMALL             | ENTITY      | OR       | SMALL      |          |
| _  | CLAIMS   |                                 |                  | HIGHE            | -            |                  | 7 _        |                   | ADDI-       | ן ר      |            | ADDI-    |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT |                  | PREVIO<br>PAID F | USLY         | PRESENT<br>EXTRA |            | RATE              | TIONAL      |          | RATE       | TIONAL   |
| NDN  | Total  | *                               | Minus            | **               |              | =                |            | X\$ 9=            |             | OR       | X\$18=     |          |
| AME  | Independent                                    | *                               | Minus            | ***              | <u> </u>     | =                |            | X43=              |             | OR       | X86=       |          |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                 |                  |                  |              |                  |            | +145=             |             | OR       | +290=      |          |
|  |  |                                 |                  |                  |              |                  | ᆫ          | TOTAL             |             | ┫╻╻┖     | TOTAL      |          |
|  |  |                                 |                  |                  |              |                  |            |                   | <u> </u>    | JOR ,    | ADDIT. FEE |          |
| -  |  | (Column 1)                      |                  | (Colum           |              | (Column 3)       |            |                   |             |          |            |          |
| <b>m</b>   |  | REMAINING                       |                  | HIGHE<br>NUMBI   | _            | PRESENT          | Г          |                   | ADDI-       | Ìſ       |            | ADDI-    |
| 닐  |  | AFTER                           | AFTER PREVIOUSLY |                  |              | EXTRA            |            | RATE              | TIONAL      |          | RATE       | TIONAL   |
| ᄬ  |  | AMENDMENT                       |                  | PAID F           | OR           | <b></b>          | <u> </u>   |                   | FEE         |          |            | FEE      |
| AMENDMENT  | Total  | *                               | Minus            | **               | , ·          | =                |            | X\$ 9=            |             | OR       | X\$18=     |          |
| ¥  | Independent                                    | NTATION OF MI                   | Minus            | PENDENT C        | · ·          | =                |            | X43=              |             | OR       | X86=       |          |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |                                 |                  |                  |              |                  |            | 145=              |             | OR       | +290=      |          |
|  | <i>:</i>                                       |                                 |                  |                  |              |                  | <u> </u>   | TOTAL<br>DIT. FEE |             | <b>L</b> | TOTAL      | •        |
|  |  |                                 |                  |                  |              |                  |            |                   |             | OR A     | DDIT. FEE  |          |
|  |  | (Column 1) CLAIMS               |                  | (Column          |              | (Column 3)       |            |                   |             |          | •          |          |
| د  | `  | REMAINING                       |                  | HIGHES           |              | PRESENT          |            |                   | ADDI-       | · [      |            | ADDI-    |
| <b>Z</b>   |  | AFTER                           |                  | PREVIOU          | SLY          | EXTRA            | F          | RATE !            | TIONAL      |          | RATE       | TIONAL   |
| Σ  |  | AMENDMENT                       |                  | PAID FO          | DR           |                  | <u> </u>   |                   | FEE         | ·        |            | FEE      |
| Ž  -   | Total  |                                 | Minus            | **               |              | =                | >          | <b>(\$ 9=</b>     | ļ           | OR       | X\$18=     |          |
|  | ndependent                                     |                                 | Minus            | ***              | 1            |                  | 5          | (43=              |             | OR       | X86=       |          |
| 1!   | -INOI PHESE                                    | NTATION OF MU                   | LIPLE DEP        | ENDENT C         | LAIM         |                  |            | 145=              | •           |          | +290=      |          |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |                                 |                  |                  |              |                  |            | TOTAL             |             | OR L     |            | <u></u>  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |                                 |                  |                  |              |                  |            |                   |             |          |            |          |
| Th   | e Highest Num                                  | ber Previously Paid             | For* (Total or   | Independent)     | is the h     | nighest number ( | found i    | in the appr       | opriate box | in colun | nn 1.      |          |